P& ase CM2089/3M DECLARATION COMBINED WITH POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

"DETERGENT TABLET"

bearing the above listed Procter & Gamble Company Case number, the specification of which was filed as PCT/IB00/00397, designating at least the United States of America, with the United States Receiving Office on 31 March 2000.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37 Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35 United States Code §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S) TO WHICH WE CLAIM PRIORITY:

99201128.8 EP 09 April 1999

I hereby claim the benefit under Title 35 United States Code §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 United States Code §112, I acknowledge the duty to disclose material information as defined in Title 37 Code of Federal Regulations §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Appln. Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Appln. Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)

Post Office Address:

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		as my attorney(s) or agent(s) with	full power of substitution
	and a second at their annuality of their	al Annong and all business in the De	stant and Tradananic affi

I hereby appoint the following as my attorney(s) or agent(s) with full power of substitution to prosecute this application and transact all business in the Patent and Trademark office connected therewith:

		Associate Po	wor
<u>Name</u>	Registration No.	Associate Poud of Attorney Atta	· · · · · · · · · · · · · · · · · · ·
Jacobus C. Rasser Donald E. Hasse T. David Reed Eileen L. Hughett	_37,043 _29,387 _32,931 _34,352	[] 100 []	
Timothy B. Guffey Emelyn L. Hiland	<u>41,048</u> <u>41,501</u>		
SEND CORRESPOND	DENCE TO: e Procter & Gamble Compa	nv	(513) 627-7025
Name	E FIOCIEL & Samble Compa	++y	Phone No.
5299 Spring Grove Av	enue <u>Cincinnat</u> i	_ Ohio	45217-1087
Street	City	State	Zip Code
statements made on i statements were made made are punishable	all statements made herein nformation and belief are belief are belief are belief that the knowledge that by fine or imprisonment, or lead that such will ful false stated thereon.	pelieved to be true; ar willfull false stateme both, under Section 10	nd further that these ents and the like so 001 of Title 18 of the
	1-00		
Full Name of sole or fill Inventor's signature _/	wil Toseph Last	Date: <u>1</u> 3 July ewcastle upon Tyne N al Centres, Whitley Ro	JE7 7XX, England (6円) ユー
Full Name of second jo	oint inventor, if any: <u>REES</u>		
Inventor's signature Residence: Citizenship:	56 Wansbeck Road, Ashin GB	Date: 1 3 July gton, Northumberland	
Post Office Address:	Procter & Gamble Technic Longbenton, Newcastle up		
Full name of third joint	inventor, if any:		
Inventor's signature Residence: Citizenship: Post Office Address:		Date:	
Full Name of fourth joi	nt inventor, if any:		
Inventor's signature		Date:	
Residence: Citizenship:			